2003 BUSINESS DECLARATION OF ESTIMATED INCOME TAX

FOR OFFICIAL USE ONLY

WITH 1/4 PAYMENT

PAYMENT

FOR CALENDAR YEAR 2003 OR MONTHS ENDING

20

Check one of the boxes below that identifies your

business entity.

PAYMENT

ANY BALANCE DUE.

OHO T

A legally filed declaration must be signed, dated and accompanied by payment. The safest and easiest way to declare is to estimate this year's taxes based on last year's taxable income. Mail To: Cincinnati Income Tax Bureau P.O. Box 5487 Cincinnati, OH. 45201-5487 on or before APRIL 30,2003.

	CORPORATION	SINGLE MEMBER LLC
	S-CORPORATION PARTNERSHIP	JOINT VENTURE TRUST
	SOLE PROP	NON-PROFIT
	LLC	VOLUNTARY W/H
		VOLUNTART W/II
	OTHER	Specify)
INTEREST AND PENALTIES MUST BE ASSESSED FOR F.	AILURE TO FILE AND MAKE	TIMELY PAYMENTS
1. ESTIMATED 2003 TAXABLE INCOME \$X 2.	1% = FSTIMATED TAX	S
Γ. ESTIMITED 2003 TAXABLE INCOME ψ X 2.	170 ESTIMATED TAX	Ψ
2. DEDUCT OVERPAYMENT OF LAST YEAR'S TAX IF YOU REQUESTED ON YOUR 2002 RETURN		
3. BALANCE OF 2002 ESTIMATED TAX PAYMENT		
4. AMOUNT TO BE PAID WITH YOUR DECLARATION AT TIME OF FILING. (1/4 of Line 1 minus Line 2)		\$
The undersigned declares this to be a true, correct and complete declaration		
SIGNATURE TITLE		DATE
EXPLANATION OF NEW TAXPAYER	R OR CHANGE OF TAX STATU	JS
ADDRESS OF CINCINNATI LOCATION		
NATURE OF BUSINESS		
LOCAL MANAGER OR REPRESENTATIVE		
DATE TAXABLE ACTIVITY BEGAN IN CINCINNATI		
WILL YOU HAVE EMPLOYEES SUBJECT TO CINCINNATI WITHHOLDING TAX?	YES NO	
WILL REMITTANCE EXCEED \$300.00 PER MONTH? YES NO		
GENERAL INFORMATIO	N & INSTRUCTIONS	
2003 DECLARATION AND RETU	RN PAYMENT CALENDAR	
APRIL 30, 2003 JULY 31, 2003 OCT. 31, FILE DECLARATION MAKE 2 ND QUARTERLY MAKE 3 RD QI	2003 JAN. 31, 2003 UARTERLY MAKE 4 TH QUARTERLY	APRIL 30, 2004 FILE RETURN, PAY

Within four months after beginning a new business located or operating within the corporate limits of Cincinnati, or for existing businesses, within 4 months of the start of the tax year, the business must file a Declaration. If filing your first Declaration, offer an appropriate additional explanation above or by attachment. Please notify the tax office promptly of any later changes. If your form is blank, or your name, address and account number have been preprinted and the information shown is *not* correct, please make necessary changes in the boxes above.

PAYMENT

The three months prior to the Declaration due date should provide a reasonably accurate basis from which most businesses can estimate the current year's income. An original estimate can and should be amended if subsequent events indicate it to be grossly in error. If impractical to base this year's estimate as suggested, refer to last year's actual taxable income as indicated on your return. An estimate based on an amount equal to or greater than the last full year's taxable income is insurance against any penalty on underestimating for Cincinnati purposes.

Make your own income and estimated tax entries on Line 1. If you overpaid last year's tax and requested transfer of same towards this year's estimated tax, enter the amount on Line 2. Then deduct it from Line 1 and enter the difference on Line 3.

Line 3 represents the net amount of your estimated tax payable this year either in full with the filing of this Declaration, or in installments as indicated by the payment calendar. Enter on Line 4 the amount of remittance accompanying your Declaration – and please retain records for future reference.

		D-1 QUARTERLY PAYMENT O	F ESTIMATED NET PROFIT TAX
FOR OFFICIAL USE OF	NLY	CINCINNATI INCOME P O BOX 640770 CINCINNATI OH 45264	2002
Enter yo	ur name and address here	ACCO	UNT NO:
		FED II	O NO:
		SSN N	O:
		TAX F	RATE: 2.10%
		QUAR	TER ENDING: MARCH 31, 2003
		DUE I	DATE: APRIL 30, 2003
AMOUNT D	UE: \$		
DATE	PHONE ()	SIGNATURE_	TITLE
		D-1 QUARTERLY PAYMENT O	F ESTIMATED NET PROFIT TAX
		CINCINNATI INCOM	ME TAX BUREAU
		P O BOX 640770 CINCINNATI OH 45:	2003
FOR OFFICIAL USE O	NII V	Circulati on 45.	
FOR OFFICIAL USE OF	NL I	ACCOU	JNT NO:
Enter your name and address here		FED ID	NO:
		SSN NO):
		TAX R.	ATE: 2.10%
		QUART	TER ENDING: JUNE 30, 2003
		DUE D.	ATE: JULY 31, 2003
AMOUNT D	UE: \$		
DATE	PHONE ()_	SIGNATURE	TITLE
		<u></u>	
		D-1 QUARTERLY PAYMENT O	F ESTIMATED NET PROFIT TAX
		CINCINNATI INCOM P O BOX 640770 CINCINNATI OH 452	2003
FOR OFFICIAL USE O	NLY	ACCOU	JNT NO:
Enter vou	er name and address here	FED ID	
		SSN NO):
			ATE: 2.10%
			TER ENDING: SEPTEMBER 30, 2003
			ATE: OCTOBER 31, 2003
AMOUNT D	UE: \$		

DATE______PHONE ()______SIGNATURE______TITLE____

D-1 QUARTERLY PAYMENT OF ESTIMATED NET PROFIT TAX

FOR OFFICIAL USE ONLY

CINCINNATI INCOME TAX BUREAU P O BOX 640770 CINCINNATI OH 45264-0770

ACCOUNT NO:

2003

SSNNO:
TAX RATE: 2.10%
QUARTER ENDING: DECEMBER 31, 200
DUE DATE: JANUARY 31, 2004

DATE_____PHONE ()_____SIGNATURE_____TITLE____